

State of Alaska
Games of Chance and Contests of Skill
2007 Permittee Annual Financial Statement
AS 05.15.080(b)

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| Dept Use Only FSN: |
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Due: March 15, 2008

This form is also available on the Internet at www.tax.alaska.gov/forms.asp

| | | |
|------------------|---------------|-------------------|
| Federal EIN | Permit Number | Organization Name |
| Mailing Address | | City, State, Zip |
| Telephone Number | Fax Number | E-mail Address |

CALCULATION OF ADDITIONAL FEE

| | | |
|---|----|--|
| 1. Gross receipts from operator/MBP activity report (Schedule AO, column A, line 10) | 1 | |
| 2. Gross receipts from permittee activity report (Schedule AP, column I, line 1) | 2 | |
| 3. Gross receipts from vendor activity report (Schedule AV, column A, Total) | 3 | |
| 4. Total gross receipts from all activities (add lines 1, 2, and 3) | 4 | |
| 5. Net proceeds from operator/MBP activity report (Schedule AO, column F, line 10) | 5 | |
| 6. Net proceeds from permittee activity report (Schedule AP, column I, line 6) | 6 | |
| 7. Net proceeds from vendor activity report (Schedule AV, column J, Total) | 7 | |
| 8. Total net proceeds from all activities (add lines 5, 6, and 7) | 8 | |
| 9. Expenses exceeding the limitations of AS 05.15.160 (c) and (d), and bingo prizes exceeding the limitations of 15 AAC 160.600(c). See Page 2 of the Instructions | 9 | |
| 10. Add lines 8 and 9 | 10 | |

If total gross receipts on line 4 are less than \$20,000, stop here and go to line 15. NO FEE IS DUE.

| | | |
|--|----|--|
| 11. FEE: Multiply line 10 by 1% | 11 | |
| 12. Penalty for late payment (1% per 30 day period or fraction of a period, not to exceed 25% of the fee on line 11) | 12 | |
| 13. Interest. See Page 2 of the Instructions | 13 | |
| 14. Total amount due (add lines 11, 12, and 13) Amount you owe | 14 | |

GAMING ACCOUNT BALANCE

| | | |
|---|----|--|
| 15. Prior year balance of ALL Games of Chance and Contests of Skill checking and savings accounts | 15 | |
| 16. Net Proceeds (Page 1, line 8) | 16 | |
| 17. Interest earned on Games of Chance and Skill checking and savings accounts | 17 | |
| 18. Other Deposits and Increases (Schedule F, line 4) | 18 | |
| 19. Total (add lines 16, 17, and 18) | 19 | |
| 20. Total Donations of net proceeds (Schedule E) | 20 | |
| 21. Other Disbursements and Reductions (Schedule F-1, line 4) | 21 | |
| 22. Total reductions to checking and savings accounts (add lines 20 and 21) | 22 | |
| 23. Year-end balance of All Games of Chance and Skill checking and savings accounts (add lines 15 and 19, subtract line 22) | 23 | |

We declare, under penalty of unsworn falsification, that we have examined this report including accompanying schedules and statements and, to the best of our knowledge and belief, it is true and complete.

| | |
|---|--------------------------------|
| Member in Charge or Agent Signature / Date X | Printed Name |
| President or Treasurer Signature / Date X | Printed Name |
| Paid Preparer's Signature / Date X | Printed Name |
| Firm Name | Firm Address, City, State, Zip |

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| DEPT USE ONLY PMD: |
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**Attach a copy of your December 31, 2006, and
 December 31, 2007, bank statements and bank reconciliations**

| |
|-----------------------------|
| DEPT USE ONLY VALIDATION |
|-----------------------------|

2007 Permittee Annual Financial Statement

| | |
|-------------------|----------------------------|
| Permit Number | Permittee Name |
| Optr Lic / MBP No | Operator or MBP Name / dba |

SCHEDULE AO: OPERATOR / MULTIPLE-BENEFICIARY PERMITTEE ACTIVITY REPORT

List only that income received as a direct result of the games, or sale of gaming equipment.
Food booth receipts and other income should not be included in this report.

| See instructions if your organization contracted with more than one operator, or is an MBP member | | Column A Gross Receipts | Column B Taxes | Column C Cost of Prizes Awarded | Column D Adjusted Gross Income <small>(col. A less B & C)</small> | Column E Game-Related Expenses | Column F Net Proceeds <small>(col. D less E)</small> |
|--|-----------------------------|---------------------------------------|--------------------------|---|--|--|---|
| 1. | Bingo | | | | | | |
| 2. | Pull-Tabs | | | | | | |
| 3. | Vendor Sales (Pull-Tabs) | | | | | | |
| 4. | Raffles | | | | | | |
| 5. | Other (Specify) | | | | | | |
| 6. | Other (Specify) | | | | | | |
| 7. | Other (Specify) | | | | | | |
| 8. | Other (Specify) | | | | | | |
| 9. | Sale of Equip. and Supplies | | | | | | |
| 10. | Total | | | | | | |
| 11. Net Proceeds Paid to Permittee by Operator / MBP | | | | | | | |

2007 Permittee Annual Financial Statement

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|---------------|----------------|
| Permit Number | Permittee Name |
|---------------|----------------|

SCHEDULE AP: PERMITTEE ACTIVITY REPORT

| | Column A Bingo⁽³⁾ | Column B Pull-Tabs⁽³⁾ | Column C Raffles | Column D Other (Specify) | Column E Other (Specify) | Column F Other (Specify) | Column G Other (Specify) | Column H Other (Specify) | Column I Total |
|------------------------------------|--|--|----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|--------------------------|
| 1. Gross Receipts | | | | | | | | | |
| 2. Taxes | | | | | | | | | |
| 3. Cost of Prizes | | | | | | | | | |
| 4. Adj Gross Income ⁽¹⁾ | | | | | | | | | |
| 5. TOTAL EXPENSES | | | | | | | | | |
| 6. NET PROCEEDS ⁽²⁾ | | | | | | | | | |

⁽¹⁾ Subtract lines 2 and 3 from line 1.

⁽²⁾ Subtract line 5 from line 4.

⁽³⁾ Accrual accounting required after Calendar Year 2002.

SCHEDULE C: GAME-RELATED EXPENSES

| | Bingo | Pull-Tabs | Raffles | Other (Specify) | Other (Specify) | Other (Specify) | Other (Specify) | Other (Specify) | Total |
|---|-------|-----------|---------|-----------------|-----------------|-----------------|-----------------|-----------------|-------|
| 1. Rental of Facility | | | | | | | | | |
| 2. Other Facility Costs | | | | | | | | | |
| 3. Contract / Pro. Services | | | | | | | | | |
| 4. Accounting | | | | | | | | | |
| 5. Wages | | | | | | | | | |
| 6. Payroll Taxes | | | | | | | | | |
| 7. Pull-Tab Tax Paid | | | | | | | | | |
| 8. Cost of Pull-Tab Games and Bingo Cards (Sch C-1) | | | | | | | | | |
| 9. Advertising | | | | | | | | | |
| 10. Equipment Purchases | | | | | | | | | |
| 11. Depreciation | | | | | | | | | |
| 12. Door Prizes | | | | | | | | | |
| 13. Other Expenses | | | | | | | | | |
| 14. TOTAL EXPENSES ⁽⁴⁾ | | | | | | | | | |

⁽⁴⁾ To Schedule AP line 5.

2007 Permittee Annual Financial Statement

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| Permit Number | Permittee Name |
|---------------|----------------|

SCHEDULE AV: VENDOR ACTIVITY REPORT

VENDOR INFORMATION

| | ABC License Number | Vendor Name |
|----------|--------------------|-------------|
| Vendor 1 | | |
| Vendor 2 | | |
| Vendor 3 | | |
| Vendor 4 | | |
| Vendor 5 | | |

FINANCIAL INFORMATION

| <i>Vendor Number from schedule above</i> | Column A Gross Receipts | Column B Taxes | Column C Prizes | Column D Adjusted Gross Income <small>(col A less col B & C)</small> | Column E Vendor Compensation | Column F Cost of Pull-Tab Games | Column G Pull-Tab Tax Paid | Column H Other Vendor Expenses | Column I Total Expenses <small>(add col E - H)</small> | Column J Net Proceeds <small>(col D minus col I)</small> |
|--|-----------------------------------|--------------------------|---------------------------|---|--|---|--|--|---|---|
| Vendor 1 | | | | | | | | | | |
| Vendor 2 | | | | | | | | | | |
| Vendor 3 | | | | | | | | | | |
| Vendor 4 | | | | | | | | | | |
| Vendor 5 | | | | | | | | | | |
| Total | | | | | | | | | | |

(to page 1, line 3)

(to page 1, line 7)

2007 Permittee Annual Financial Statement

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|---------------|----------------|----------------|-----------------------------------|
| Permit Number | Permittee Name | License Number | Operator Name / Vendor Name / dba |
|---------------|----------------|----------------|-----------------------------------|

SCHEDULE D: PULL-TAB ATTACHMENT

All pull-tabs were reported on the quarterly report: (check one) Yes No

The attached games were sold by: (check one) Permittee Vendor Operator

| Distributor License No. | State ID Stamp Label | Game Serial Number | Form Number | Gross Receipts | Prize Payout | Ideal Net | 3% Tax | Date In/ Date Out |
|---|----------------------|--------------------|-------------|----------------|--------------|-----------|--------|--|
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| Subtotal (amounts from this page) | | | | | | | | Use additional sheets if necessary. |
| Grand Total (include amounts from all pages) | | | | | | | | |

2007 Permittee Annual Financial Statement

| | |
|---------------|----------------|
| Permit Number | Permittee Name |
|---------------|----------------|

Page ____ of ____

SCHEDULE E: DONATIONS OF NET PROCEEDS

| RECIPIENT | PURPOSE | DATE | CHECK NO | AMOUNT |
|------------------|----------------|-------------|-----------------|---------------|
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Subtotal (amounts from this page)

Grand Total (include amounts from all pages, enter on page 1, line 20)

Use additional sheets if necessary.

2007 Permittee Annual Financial Statement

| | |
|---------------|----------------|
| Permit Number | Permittee Name |
|---------------|----------------|

SCHEDULE C-1: COST OF PULL-TAB GAMES AND BINGO CARDS

Inventory method for pull-tab games:

- Unopened Games
 Percent Complete

1. Cost of inventory of unopened games/unused cards at beginning of year.
 (If different from last year's ending inventory, attach explanation.)
2. Cost of pull-tab games or bingo cards purchased.
3. Add line 1 and line 2.
4. Cost of inventory of unopened games/unused cards at end of year.
5. Cost of pull-tab games (Subtract line 4 from line 3).¹
6. Cost of bingo cards (Subtract line 4 from line 3).²

| | Pull-Tab Games | | Bingo Cards |
|---|----------------|--------|-------------|
| | Self-Directed | Vendor | |
| 1 | 1 | 1 | 1 |
| 2 | 2 | 2 | 2 |
| 3 | 3 | 3 | 3 |
| 4 | 4 | 4 | 4 |
| 5 | 5 | 5 | 5 |
| 6 | | | 6 |

¹ For self-directed games, enter on Schedule C, line 8, pull-tabs.
 For vendor games, line 5 must equal Schedule AV, Column F, line 6.
² Enter on Schedule C, line 8, bingo.

Use Schedules F and F-1 to reconcile Page 1, line 23, of the 2007 Annual Financial Statement to your December 31, 2007 gaming bank account reconciliation.

SCHEDULE F: OTHER DEPOSITS AND INCREASES

1. Prior year net proceeds deposited after December 31, 2006.
2. Sales Tax Collected.⁽¹⁾
3. Other deposits and increases (please describe, including loans and gifts):

4. Total (Enter on page 1, line 18).

| | |
|---|---|
| 1 | |
| 2 | + |
| 3 | + |
| 4 | |

SCHEDULE F-1: OTHER DISBURSEMENTS AND REDUCTIONS

1. Current year net proceeds not deposited by December 31, 2007.
2. Non-deductible sales tax.⁽¹⁾
3. Other disbursements / reductions (please describe):

4. Total (Enter on page 1, line 21).

| | |
|---|----------------------|
| 1 | |
| 2 | + |
| 3 | + |
| 4 | (to page 1, line 21) |

⁽¹⁾ See instructions for permittee activity report, Schedule AP, total gross receipts.